



**PATIENT PRESENTING CLINICAL SIGNS**

Layla Koma History: Lethargic and stiff  
Abnormal PE/Chem/CBC/UA Results: Bloodwork unremarkable

**SPECIES RADIOGRAPHIC STUDY OF THE ABDOMEN AND L-SPINE**

Canine The body condition score is 7/9 with an obvious amount of s.c. fat dorsal to the lumbar spine.

**BREED** No signs of aggressive osteolysis have been identified. Calcified bodies and linear mineralization is located on the lateral aspects of T13-L3. On the lateral view this results in the impression of calcified material dorsal to the respective disc spaces. LS disc space and intervertebral foramen are reduced, and the endplates are sclerotic; associated ventral spondylosis is present. Both hip joints are well visible.

**SEX** The abdominal detail is good; diaphragm and abdominal wall are intact.  
Spayed Female The liver is located within the costal arch and the caudo-ventral lobe is pointed.

**AGE** The spleen appears to be located on the left abdominal wall.  
10 Years GIT, urinary tract and sublumbar region appear physiological.

**INTERPRETED BY RADIOGRAPHIC DIAGNOSIS**

Heike Rudorf, DVM,  
Dr. med. Vet.,  
DipECVDI DVR

**LS-Junction**

- Reduced disc space
- Sclerotic endplates
- Spondylosis

**HOSPITAL NAME** Lateral spondylosis and mineralization (T13-L3)  
St. Catharine's AH

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**REFERRING VET** The changes of the LS junction are likely the result of disc disease and cross-sectional imaging is recommended in case surgical intervention is indicated. A neurological examination can help rule out compression related to the nerve roots T13 to L3; this area should be included in the cross-sectional imaging.  
Dr. Boctor

**INVOICE**

14061

**DATE**

2/24/22



**PATIENT**

Layla Koma

**SPECIES**

Canine

**BREED**

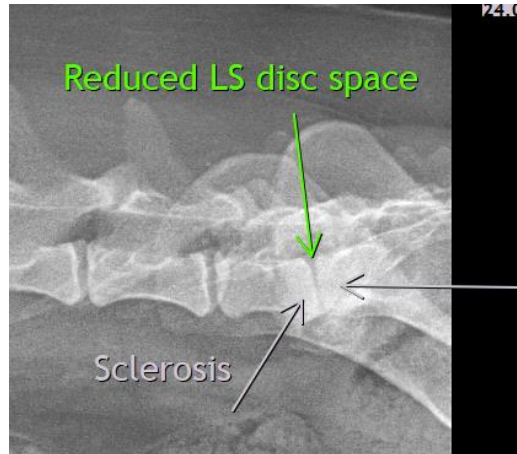
Border Collie Mix

**SEX**

Spayed Female

**AGE**

10 Years



**INTERPRETED BY**

Heike Rudolf, DVM,  
Dr. med. Vet.,  
DipECVDI DVR

**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

**HOSPITAL NAME**

St. Catharine's AH

**Heike Rudolf**, DVM, Dr. med. vet., DipECVDI, DVR  
dr.h.rudorf@gmail.com

**REFERRING VET**

Dr. Boctor

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